

A – OWNER DETAILS (must be over 18 years of age, only one owner permitted)					
A - OWNER DE LAIES (must be over 18 years or age, only one owner permitted)					
Mr Ms Miss Mrs Other					
Surname: Given Name/s:					
Residential Address:					
Suburb: Postcode:					
D.O.B (dd/mm/yy)://					
Postal Address (if different to above):					
Suburb: Postcode:					
Phone: (Home) (Work) (Mobile)					
Email:					
Can the City of Melville use this email address to issue renewal notices and other relevant information?					
OWNERS' DELEGATE CONTACT DETAILS (optional, must be over 18 years of age)					
Mr Ms Miss Mrs Other					
Surname: Given Name/s:					
Residential Address:					
Suburb: Postcode:					
D.O.B (dd/mm/yy)://					
Postal Address (if different to above):					
Suburb:Postcode:					
Phone: (Home) (Work) (Mobile)					
B – DOG DETAILS					
Dog's Name: D.O.B: / Breed:					
Colour: Gender: Male Female Microchip Database Company:					
Microchip Certificate Attached (optional): Yes No Microchip Number:					
Sterilised: Yes No Any distinguishing marks/features:					
Sterilised: Yes No Any distinguishing marks/features:					
Sterilised: Yes No Any distinguishing marks/features:					
Sterilised: Yes No Any distinguishing marks/features: Address where dog is normally kept (if different from above):					
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- Wears a collar displaying the owner's name, address and council registration tag when in a public place
- Dogs aged three months and over must be registered.
- Is under the control of a competent person on a maximum two-metre lead when in a public place.
- Is exercised off a leash in designated areas only, with the person in control carrying a leash to ensure the dog can be restrained if required.
- Proof of dog being sterilised (eg; sterilisation certificate).
- Any change in particulars contained in this application including change of ownership, death of animal and any change in address MUST be notified to council.

Dog registrations must be renewed prior to 1 November. Penalties may apply for failing to renew your dog registration.

D – REGISTRATION FEES (Please tick appropriate box)						
FEES PAYABLE	Lifetime		Three Years		One Year	
	Full	Pension	Full	Pension	Full	Pension
Unsterilised	□ \$250.00	□\$125.00	□\$120.00	□\$60.00	□ \$50.00	□\$25.00
Sterilised	□ \$100.00	□\$50.00	□\$42.50	□\$21.25	□\$20.00	□\$10.00
Dangerous Dog					□ \$50.00 (annually)	
Assistance Dog (Supporting evidence attached) Nil Fee Applicable						
Are you eligible for a pensioner concession? Yes No (If yes a copy (both sides) of your current Pensioner Card must be attached.)						

E – PREVIOUS CONVICTIONS, RELEVANT ORDERS

Do you have any convictions for offences against the *Dog Act 1976, Cat Act 2011* or *Animal Welfare Act 2002* in past 3 Years? Yes No If yes, please give details, specifying the date of the conviction(s), nature of the offence and the legislation involved:

Are you currently banned, or have you ever been banned, from owning or keeping a dog under an order under the Dog Act 1976 section 46A(2) either permanently or for a period specified in the order? Yes No I fyes please give details of the order:

F - IMPORTANT (Please read and sign this declaration. Registration will not be processed without signature)

- I declare that the information I have provided is true and correct;
 I certify, that for the purposes of section 16(1a) of the Act, that means exist on the premises at which the dog will ordinarily be kept for effectively confining the dog within those premises;
 I am aware that it is an offense to provide false and misleading
- information;I understand that Local Government may refuse an application if any or

Tag #_

all the required information is not provided within the time period specified in the legislation;I am or the owner is not under 18 years of age

PROOF OF STERILISATION:

(Please attach photocopy) Proof of sterilisation is required in the form of either:

- Veterinary Surgeon Certificate
- Signed Statutory Declaration

Signature:

Date:

PAYMENT OPTIONS					
		Copy all details from your card in spaces in below;			
	Pay with cash, cheque, debit card or Credit Card. You can pay at the office of the City	Card Number:			
	of Melville, 10 Almondbury Road, Booragoon, during office hours.	Expiry Date: /			
	Send in this completed form with Credit Card details or cheque payable to: City of	Card Type: MasterCard Visa American Express			
	Melville, 10 Almondbury Road, Booragoon, W.A. 6154	Card Holder's Name:			
	Pay by credit card at <u>www.melvillecity.com.au/</u> Or Email completed form to:	Amount:			
	melinfo@melville.wa.gov.au	Signature:			

Click to attach supporting documents

Official Use Only

Animal #

____ Registration: Life / 3 Years / 1 Year Officer:____

_ Date:___/__/__

City of Melville – Locked Bag 1, Booragoon WA 6954 – (08) 9364 0666 – 1300 635 845 – melinfo@melville.wa.gov.au